

STATE OF IDAHO
DIVISION OF BUILDING SAFETY
PLUMBING BUREAU

APPLICATION PROCEDURE FOR MOBILE HOME SPECIALTY PLUMBING LICENSE

1. QUALIFIED PLUMBERS, AS DEFINED IN IDAHO CODE SECTION 54-2611(A) AND (B), SHALL BE PERMITTED TO MAKE ALL INSTALLATIONS AS SUBSEQUENTLY DESCRIBED THEREIN WITHOUT SECURING AN ADDITIONAL LICENSE FOR SAID INSTALLATION.
2. EXPERIENCE GAINED BY AN INDIVIDUAL WHILE ENGAGED IN THE PRACTICE OF THE SPECIALTY NAMED BELOW SHALL NOT BE CONSIDERED TOWARDS THE MINIMUM EXPERIENCE REQUIREMENTS FOR LICENSING AS A JOURNEYMAN PLUMBER.
3. THE EXPERIENCE REQUIREMENT FOR SUCH SPECIALTY LICENSE SHALL BE TWO (2) YEARS OF EXPERIENCE WITH THE TYPE OF INSTALLATION FOR WHICH THE LICENSE IS BEING APPLIED.
4. THE APPLICATION FOR A SPECIALTY PLUMBING LICENSE MUST BE PROPERLY COMPLETED, GIVING NAMES AND MAILING ADDRESSES OF EMPLOYERS, AND DATES OF EMPLOYMENT. THE APPLICATION MUST BE SIGNED AND NOTARIZED. **PLEASE NOTE: A CURRENT PICTURED IDENTIFICATION MUST ACCOMPANY THE APPLICATION.**

NOTE: AT LEAST TWO (2) YEARS EXPERIENCE MUST BE VERIFIED IN THE FORM OF SIGNED NOTARIZED STATEMENTS FROM EMPLOYERS GIVING THE DATES OF EMPLOYMENT AND TYPE OF WORK PERFORMED.

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LICENSES PAID BY CASH, MONEY ORDER, OR CASHIER'S CHECK WILL BE MAILED IMMEDIATELY. LICENSES PAID BY CHECK WILL BE HELD FOR TWO (2) WEEKS.

A NON-REFUNDABLE \$22.50 APPLICATION FEE IS REQUIRED FOR EACH SPECIALTY JOURNEYMAN AND SPECIALTY CONTRACTOR APPLICATION.

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5. MAIL THE APPLICATION TO THE **DIVISION OF BUILDING SAFETY, PLUMBING BUREAU, 1090 E. WATERTOWER ST., MERIDIAN, ID 83642.** ALL APPLICATIONS MUST BE APPROVED BY THE PLUMBING BUREAU AT LEAST FIFTEEN (15) DAYS BEFORE EXAMINATIONS ARE GIVEN.
6. THE EXAMINATION CONSISTS OF WRITTEN QUESTIONS. TIME FOR WRITING THE EXAMINATION IS LIMITED TO TWO (2) HOURS. NO LICENSE SHALL BE ISSUED UNLESS THE APPLICANT RECEIVES A FINAL GRADE OF 75% OR HIGHER. SPECIALTY JOURNEYMAN APPLICANTS RECEIVING A GRADE OF LESS THAN 75% MAY APPLY FOR RE-EXAMINATION UPON PAYMENT OF THE RE-EXAMINATION FEE.
7. ALL SUCCESSFUL APPLICANTS WILL BE NOTIFIED OF THE LOCATION, TIME, AND DATE OF THE EXAMINATIONS. THE TESTING INSTITUTE WILL REQUIRE AN EXAMINATION FEE.
8. SPECIALTY PLUMBING LICENSES EXPIRE DECEMBER 31 OF EACH YEAR. THE INITIAL LICENSE FEE FOR A MOBILE HOME SPECIALTY PLUMBING LICENSE IS \$15.00 FOR THE JOURNEYMAN AND \$75.00 FOR THE CONTRACTOR. THE RENEWAL FEE FOR A SPECIALTY PLUMBING LICENSE IS \$7.50 FOR THE JOURNEYMAN AND \$37.50 FOR THE CONTRACTOR.
9. THE HOLDER OF A SPECIALTY JOURNEYMAN PLUMBING LICENSE, IN GOOD STANDING, MAY MAKE MOBILE HOME HOOK-UPS AS AN EMPLOYEE OF A LICENSED PLUMBING CONTRACTOR FOR HIS SPECIALTY.

STATE OF IDAHO
DIVISION OF BUILDING SAFETY
PLUMBING BUREAU

MOBILE HOME SPECIALTY PLUMBING LICENSE EXAMINATION APPLICATION

ALL DISHONORED CHECKS WILL BE REQUIRED TO PAY A COLLECTION FEE NOT TO EXCEED \$20.00, AS PER IDAHO CODE 28-22-105.

NAME: _____
(PLEASE PRINT OR TYPE)

SOCIAL SECURITY NUMBER: _____ AGE: _____

ADDRESS: _____
(STREET, BOX OR ROUTE) (CITY) (PHONE NUMBER)

(COUNTY) (STATE) (ZIP CODE)

INTENDED NAME OF PLUMBING BUSINESS: _____

CHECK THE TYPE OF SPECIALTY LICENSE YOU ARE APPLYING FOR

NOTE: MOBILE HOME HOOK-UP CONTRACTOR _____ MOBILE HOME HOOK-UP JOURNEYMAN _____ BOTH
AN APPLICANT FOR A SPECIALTY LICENSE MUST HAVE TWO (2) YEARS OF EXPERIENCE WITH THE TYPE OF
INSTALLATIONS FOR WHICH THE LICENSE IS BEING APPLIED. PLEASE PROVIDE THE NAMES AND ADDRESSES OF
EMPLOYERS AND THE LENGTH OF TIME EMPLOYED. IT IS THE RESPONSIBILITY OF THE APPLICANT TO VERIFY AND
SUBSTANTIATE ALL INFORMATION SUPPLIED. **A COPY OF YOUR CURRENT PICTURED IDENTIFICATION MUST
ACCOMPANY THIS APPLICATION.**

ATTACH SIGNED, NOTARIZED STATEMENTS FROM EACH EMPLOYER LISTED

NAME OF
EMPLOYER: _____ FROM: _____ TO: _____
MONTH/DAY/YEAR MONTH/DAY/YEAR

ADDRESS: _____ TYPE OF WORK: _____

NAME OF
EMPLOYER: _____ FROM: _____ TO: _____
MONTH/DAY/YEAR MONTH/DAY/YEAR

ADDRESS: _____ TYPE OF WORK: _____

NAME OF
EMPLOYER: _____ FROM: _____ TO: _____
MONTH/DAY/YEAR MONTH/DAY/YEAR

ADDRESS: _____ TYPE OF WORK: _____

IF MORE SPACE IS NEEDED FOR FURTHER DETAILS AS TO EXPERIENCE AND PLUMBING TRAINING, PLEASE USE AN
ADDITIONAL SHEET OF PAPER.

**I UNDERSTAND THAT IF I AM A CONTRACTOR AND I WORK WITH THE TOOLS, I MUST ALSO BE LICENSED AS A
SPECIALTY JOURNEYMAN IN THE STATE OF IDAHO.**

I, _____, BEING FIRST DULY SWORN,
DO HEREBY CERTIFY THAT THE ABOVE STATEMENTS ARE TRUE AND CORRECT.

SIGNATURE OF APPLICANT

SUBSCRIBED AND SWORN TO BEFORE ME THIS _____ DAY OF _____, 20____

NOTARY PUBLIC FOR: _____

MY COMMISSION EXPIRES: _____